

Documentation and Reporting Type 2 Diabetes Mellitus and Complications

DOCUMENTATION TIPS

- 1) Diabetes mellitus codes are **combination codes** that include: 1) type of diabetes, 2) body system affected by complication(s) and, 3) complication(s) affecting that body system.
- 2) **ICD-10-CM coding guidelines** indicate the term “with” presumes a causal relationship between two conditions linked in the code book. When these conditions are documented on the same date of service, report the combination code that supports the diabetic complication, unless the provider documents that the conditions are not related.
- 3) Document diabetic complications with appropriate cause and effect language, when applicable, such as: “diabetic,” “due to diabetes,” or “associated with.”
- 4) Document the A1c control status as “out of control,” “poorly controlled,” “inadequately controlled,” or use the terms, hyperglycemia or hypoglycemia. The term “uncontrolled” cannot be coded.

E11.2- Type 2 diabetes mellitus with kidney complications

E11.21 Type 2 diabetes with diabetic nephropathy

E11.22 Type 2 diabetes with diabetic chronic kidney disease

- Use additional code to identify stage of chronic kidney disease (N18.1-N18.6).
- Use additional code to identify dialysis status (Z99.2)

E11.29 Type 2 diabetes with unspecified kidney complications

- b) Proliferative including stable, with or without macular edema, retinal detachment.

Other diabetic ophthalmologic complications

E11.36 Type 2 diabetes with diabetic cataract

E11.39 Type 2 diabetes with other diabetic ophthalmic complications:

- a) Diabetic glaucoma,
- b) Legal blindness due to diabetes

E11.3- Type 2 diabetes mellitus with ophthalmic complications

Document the affected eye(s) and assign the correct 7th character to indicate laterality in patients with proliferative and nonproliferative retinopathy:

- a) 1 = right eye,
- b) 2 = left eye,
- c) 3 = bilateral,
- d) 9 = unspecified eye

Retinopathy

- a) Nonproliferative including severity and with or without macular edema

E11.4- Type 2 diabetes mellitus with neurological complications

E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified

E11.41 Type 2 diabetes with diabetic mononeuropathy

E11.42 Type 2 diabetes with diabetic polyneuropathy

E11.43 Type 2 diabetes with diabetic autonomic (poly)neuropathy – Diabetic gastroparesis

E11.44 Type 2 diabetes with diabetic amyotrophy

E11.49 Type 2 diabetes with other specified diabetic neurological complications

E11.5- Type 2 diabetes mellitus with circulatory complications

E11.51 Type 2 diabetes with diabetic peripheral angiopathy without gangrene
E11.52 Type 2 diabetes with diabetic peripheral angiopathy with gangrene

E11.6- Type 2 diabetes mellitus with other specified complications

E11.610 Type 2 diabetes mellitus with diabetic neuropathic arthropathy
E11.618 Type 2 diabetes with diabetic arthropathy

E11.620 Type 2 diabetes with diabetic dermatitis

E11.621 Type 2 diabetes with foot ulcer
Use additional code to identify site and severity of ulcer (L97.4-, L97.5-)

E11.622 Type 2 diabetes with other skin ulcer
Use additional code to identify site and severity of ulcer (L97.1- - L97.9-, L98.41- - L98.49-)

These diagnosis codes represent Type 2 diabetes mellitus. If the patient has **Type 1 diabetes** use category E10 to report diabetes and any diabetic complications.

DOCUMENTATION AND REPORTING EXAMPLE

Patient with poorly controlled diabetic CKD, stage 3b, stable. Reviewed labs from 1/20/2021, A1c is 7.2, eGFR is 34. Continue insulin. Hypertension – 140/80 – continue Lisinopril 40 mg q.d. Referral to ophthalmologist for annual retinal eye exam.

Diagnosis Codes

E11.65 Type 2 diabetes mellitus with hyperglycemia
E11.22 Type 2 diabetes mellitus with chronic kidney disease
N18.3b CKD, stage 3b
I10 Essential hypertension
Z79.4 Long-term (current) use of insulin



HEDIS: Detailed information about the Diabetes measure available through your Passport/Molina Quality Representative.

According to the ICD-10-CM Official Guidelines for Coding and Reporting FY2022: “A dash (-) at the end of an alphabetic index entry indicates that additional characters are required.” Refer to the tabular list to identify the appropriate character(s) that will complete the diagnosis code.

1. ICD-10-CM Official Guidelines for Coding and Reporting FY2022. 1 Oct. 2021, www.cms.gov/files/document/fy-2022-icd-10-cm-coding-guidelines.pdf. Accessed 30 Nov. 2021.